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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			First Named Inventor	Yelukuri				
			COMPLETE IF KNOWN					
(37 CF		Application Number						
		<u>, </u>	Filing Date	- 				
Declaration Submitted OR	• • • • • • • • • • • • • • • • • • • •	ed after Initial	Art Unit					
With Initial Filing	Filing (st (37 CFR	urcharge	Examiner Name			— — —		
, many	required		EXBITITION TO THE					
I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Dynamic riip-op ricoc	Dynamic Flip-Up Head Restraint							
the specification of which		(Title of the	Invention)					
l'			•					
is attached hereto								
OR			٦					
was filed on (MM/DD/Y)	YYY)		as United States A	pplication Nur	πber or PCT	International		
Application Number		and was amended	d on (MM/DD/YYYY)		((if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application	Country	Foreign Filing		ority aimed	Certified Co Yes	py Attached? N		
Number(s)								
Additional foreign application	don numbers a	re listed on a suppl	emental priority data sh	neet PTO/SB/	02B attached	d hereto.		

[Page 1 of 2]

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City State ZIP										
Chicago	185-a-ia 80604									
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and belief are believed to be statements and the like so mad	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							Williul Taise		
NAME OF SOLE OR FIRST IN	VENTOR:		ПД	atition ¹	has h	een file	d for thi	s unsian	ned inventor	
Given Name			<u>~~</u>			Family	Name			
(first and middle [if any])					.	or Surn	ame _{Ye}	tukuri		·
Inventor's Signature Residence: City Rochester Hills Michigan Country USA Citizenship India										
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NAME OF SECOND INVENTO	R:	•			A	petition	has be	en filed f	for this unsig	ned inv ntor
Civen Name Family Name										
(first and middle [if any]) Maden					_ ٩	or Suma	ame Hi	nwet		
Inventor's Made Human Date 1-15-04										
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Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached herato.										

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Application Number	
Filing Date	
First Named Inventor	Yetukuri
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Attorney Docket Number	02-022.8

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		the entire interest. See 37 CFR 3.71.						
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Practitioner(s) named b	elow:				• • • • • • • • • • • • • • • • • • •		
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Country	United States			1	<u> </u>		
Telephone	312-935-2000		Fax	312-935-2001			
Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
	SIGNATURE of	Applicant or Ass	signce	of Record			
Name Kaur	S. GREWAL						
Date Telephone 2 4 (117)							
/ / / / / / / / / / / / / / / / / / /	m 151 04			Telephone	219-447-1020		
NOTE: Signatures of all the Inventoms if more than one signature in	tors or assignees of record of the entite required, see below.	re interest or their r	epresent	ative(s) are required.	Submit multiple		
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Application Number POWER OF ATTORNEY First Named Inventor Yetukuri and Title **CORRESPONDENCE ADDRESS** Art Unit INDICATION FORM Examiner Name Attorney Docket Number 02-022.8

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SIGNATURE of Applicant or Assignee of Record							
Name MLADEN HUMER							
Signature Moder There							
Date 15- Jan-04 Telephone 248 447-1696							
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